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CONFIRMATION NO. 8404

<b>SERIAL NUMBER</b> 09/900,923	<b>FILING OR 371(c) DATE</b> 07/09/2001 <b>RULE</b>	<b>CLASS</b> 024	<b>GROUP ART UNIT</b> 3677	<b>ATTORNEY DOCKET NO.</b> PE-1	
<b>APPLICANTS</b> Paul Elliott, Sound Beach, NY;					
<b>** CONTINUING DATA *****</b> This application is a CIP of 09/370,616 08/07/1999 PAT 6,256,840 <i>JK</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 07/31/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>JK</i> <i>JK</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> NY	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 9	<b>INDEPENDENT CLAIMS</b> 6
<b>ADDRESS</b> MICHAEL I. KROLL ATTORNEY AT LAW 171 STILLWELL LANE SYOSSET, NY 11791					
<b>TITLE</b> Towel attachment device					
<b>FILING FEE RECEIVED</b> 475	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		